2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746321

Entity Name: SPANISH WELLS HOMEOWNERS ASSOCIATION, INC.

FILED Mar 30, 2015 Secretary of State CC1508424510

Current Principal Place of Business:

12650 WHITEHALL DR FT MYERS, FL 33907

Current Mailing Address:

C/O RESORT MANAGEMENT 2685 HORSESHOE DR. S. SUITE # 215 NAPLES, FL 34104 US

FEI Number: 59-2022320 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MIKES, JASON H 711 5TH AVENUE SOUTH SUITE #212 NAPLES, FL 34102 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JASON HAMILTON MIKES 03/30/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT Title VP

NameNEYHART, KENNameJACOBSON, DAVIDAddress28403 TASCA DR.Address28406 TASCA DRIVE

City-State-Zip: BONITA SPRINGS FL 34135 City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR Title D

Name BURICH, CARL Name MEISER, HOWARD K
Address 28409 TASCA DRIVE Address 28372 TASCA DR

City-State-Zip: BONITA SPRINGS FL 34135 City-State-Zip: BONITA SPRINGS FL 34135

Title SECRETARY, TREASURER Title DIRECTOR

Name EVERLY, LAWERENCE Name LYONS, WILLIAM

Address 9851 TREASURE CAY LANE Address 9952 TREASURE CAY LANE

City-State-Zip: BONITA SPRINGS FL 34135 City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR

Name POTTS, THOMAS H

Address 28407 LAS PALMAS CIRCLE
City-State-Zip: BONITA SPRINGS FL 34135

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KENNETH NEYHART PRESIDENT 03/30/2015